Quality Committee

met on Wednesday 15 April 2015

KEY MESSAGES include:

Investment in Diabetes Care has delivered improvements in nursing, podiatry and consultant infrastructure. There has been an almost 4-fold increase in the number of patients seen each month by podiatrists, and 85% of referrals to the Specialist Nurses are being seen within one working day. The Trust will now monitor whether the increased activity is translating into demonstrably more effective diabetes care, to reduce the problems which were identified at Diabetes Risk Summits held in November and December 2013.

The total of seven currently open Never Events are of particular concern. The Medical Director recently communicated to all staff (letter and guidance available at http://ouh.oxnet.nhs.uk/MedicalDirector/Pages/Default.aspx). The process for response and follow up to a reported Never Event will be kept under close scrutiny.

The monthly Quality Report showed an improved performance in some areas, including:
• % of incidents with moderate harm or greater
• % of patients seen, assessed and discharged/admitted within 4 hours of arrival at ED
• Zero single sex accommodation breaches
but deteriorating performance in some other areas, including:
• % of patients with fractured neck of femur receiving surgery within 36 hours of admission
• % compliance with antimicrobial guidelines

The Quality Report also highlighted quality items raised by Oxfordshire Clinical Commissioning Group [OCCG]. In particular, to address GP concerns about closing the loop on diagnostic tests, there is now a requirement for all diagnostic tests to be endorsed within five working days, and for abnormal results to be communicated to the patient and GP.

There is an enhanced mechanism for monitoring the potential impact on quality of Cost Improvement Programmes [CIP], to enable the Quality Committee to monitor whether the level of risk is affected by the interaction between CIP, and/or in the aggregation of risk associated with individual CIP.

Progress has been made to address issues identified in assessment against the Quality Governance framework. The Trust Board is committed to ensuring that it is
• sufficiently aware of potential risks to quality; and that it is
• promoting a quality-focused culture throughout the Trust; with
• clearly defined, well-understood processes for escalating and resolving issues and managing quality performance.

Other documents noted/reviewed by the Quality Committee included:
• Latest draft of the Quality Account 2014/15, due to be published on 30 June 2015
• Proposals for the development of a Patient and Public Involvement Strategy 2016-19
• Prevention of Future Death Reports issued by HM Coroner

For further information please contact the Head of Corporate Governance xt 72474